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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/615,712	
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	First Named Inventor	Pestes, Dale	
	Art Unit	3736	
	Examiner Name	Apanius, Michael	
Total Number of Pages in Submission	12	Attorney Docket Number	CDM/3912.9999

ENCLOSURES (Check all that apply)		
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Remarks Check No. 73607 in the sum of \$750; replacement drawing sheet (FIGs. 1-3); and return acknowledgment postcard		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Or Individual Name	Charles D. McClung Chernoff, Vilhauer, McClung & Stenzel, LLP 1600 ODS Tower 601 S.W. Second Avenue Portland, OR 97204	
Signature		
Date	July 11, 2006	

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or Printed Name	Charles D. McClung		
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